



REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)
Summary Sheet

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|------------------------------------|
| FILE NUMBER |
| TOTAL PAGES IN ENTIRE CFA-4 REPORT |
| 4 |

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

| COMMITTEE INFORMATION | | |
|--|--|---|
| 1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name Committee For Dan Henke | | |
| 2. Acronym or Abbreviated Name (if any) | | 317-946-6618 |
| 4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address 13565 Courtney Dr. | | |
| 5. City, State, ZIP Code Fishers, Indiana, 46037 | | 6. Party Affiliation (if applicable) Republican |
| CANDIDATE INFORMATION (For Candidate's Committees Only) | | |
| 7. Full Name of Candidate (include any nickname) Daniel Edward Henke | | 8. Party Affiliation or If Independent Candidate Republican |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) Fishers Town Court | | 10. County of Residence Hamilton |
| TYPE OF REPORT | | CONVENTION CANDIDATES ONLY |
| 11. Check one: Pre-Primary <input checked="" type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other _____ <input type="checkbox"/> Final/Disbands Committee (lines 18, 19, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (within 10 days amend Statement of Organization) | | Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention |
| 12. Reporting Period: From: 04-09-11 Through: 10-14-11 | | COLUMN A This Period |
| 13. Cash on hand and investments at the beginning of this reporting period. | | 3151.85 |
| 14. Cash on hand and investments January 1, current year. | | 0 |
| CONTRIBUTIONS AND RECEIPTS | | |
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) | | |
| 15a. Itemized (use Schedule A) | | 700.00 |
| 15b. Unitemized | | 0 |
| 15c. Add lines 15a and 15b in both columns SUBTOTAL | | 700.00 |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL | | 3851.85 |
| EXPENDITURES | | |
| (Note: These amounts include in-kind expenditures and loan repayments.) | | |
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C) | | 487.91 |
| 17b. Unitemized | | 0 |
| 17c. Add lines 17a and 17b in both columns SUBTOTAL | | 487.91 |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL | | 3363.94 |
| 19. Debts OWED BY the committee (use Schedule D) | | 0 |
| 20. Debts OWED TO the committee (use Schedule E) | | 0 |
| CERTIFICATION | | |
| I, _____, certify that the information furnished on this report is true and correct to the best of my knowledge and belief it is true, correct and complete. | | |
| Title Treasurer | | Date 10/19/11 |
| | | Date 10/19/11 |
| for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly person who fails to file a complete or accurate report as required by the Indiana and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18) | | |

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Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2)
CONTRIBUTIONS BY CORPORATIONS
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

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| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS <small>(street, number, city, state, ZIP code)</small> | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULAT VE YEAR-TO-DATE | DATE RECEIVED RECEIVED BY |
|---|---|-----------------------------------|--|-------------------------------------|
| 1. A&F Engineering 8365 Keystone Crossing Suite 201 Indianapolis, IN 46240 | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | \$200.00 | \$200.00 | 9/29/11 Daniel Henke |
| 2. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| 3. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| 4. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| 5. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$200.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <small>(Enter total on ITEM 15a of the Summary Sheet)</small> | | \$ | | |



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(CFA-4 SCHEDULE A-4)
CONTRIBUTIONS BY
POLITICAL ACTION COMMITTEES
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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|---------------------------|
| FILE NUMBER |
| |
| Page <u>1</u> of <u>1</u> |

| CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS <small>(street, number, city, state, ZIP code)</small> | TYPE OF CONTRIBUTION OR OTHER RECEIPT | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE: YEAR-TO-DATE | DATE RECEIVED RECEIVED BY |
|---|---|-----------------------------------|---|---------------------------------|
| 1. Committee to Elect Mike Colby 120 Northwood Dr. Fishers, IN 46038 | Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | \$500.00 | \$500.00 | 8/5/11 Daniel E. Henke |
| 2. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| 3. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| 4. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| 5. | Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc. (specify) | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE A | | \$500.00 | | |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY <small>(Enter total on ITEM 15a of the Summary Sheet)</small> | | | | |



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(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

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| RECIPIENT'S NAME AND MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i> | RECIPIENT'S OCCUPATION <i>OFFICE SOUGHT (if applicable)</i> | TYPE OF EXPENDITURE and PURPOSE <i>(be specific)</i> | COLUMN A AMOUNT THIS PERIOD | COLUMN B CUMULATIVE YEAR-TO-DATE | DATE OF EXPENDITURE |
|--|--|---|-----------------------------------|--|------------------------|
| <div>Code A</div> <div>Sharp Printing</div> <div>8645 East 116th Street</div> <div>Fishers IN 46038</div> | Printing | <div><input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind</div> <div><input type="checkbox"/> Payment of Debt</div> <div><input type="checkbox"/> Returned Contribution</div> <div><input type="checkbox"/> Other _____</div> <div>Purpose:</div> | 291.58 | 2773.98 | 04/14/11 |
| <div>Code A</div> <div>HMC Screen Printing</div> <div>954 Conner Street</div> <div>Noblesville, IN 46060</div> | Printer | <div><input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind</div> <div><input type="checkbox"/> Payment of Debt</div> <div><input type="checkbox"/> Returned Contribution</div> <div><input type="checkbox"/> Other _____</div> <div>Purpose:</div> | 196.33 | 196.33 | 04/14/11 |
| | | | | | |
| | | <div><input type="checkbox"/> Direct <input type="checkbox"/> In-Kind</div> <div><input type="checkbox"/> Payment of Debt</div> <div><input type="checkbox"/> Returned Contribution</div> <div><input type="checkbox"/> Other _____</div> <div>Purpose:</div> | | | |
| <div>Code _____</div> | | <div><input type="checkbox"/> Direct <input type="checkbox"/> In-Kind</div> <div><input type="checkbox"/> Payment of Debt</div> <div><input type="checkbox"/> Returned Contribution</div> <div><input type="checkbox"/> Other _____</div> <div>Purpose:</div> | | | |
| <div>Code _____</div> | | <div><input type="checkbox"/> Direct <input type="checkbox"/> In-Kind</div> <div><input type="checkbox"/> Payment of Debt</div> <div><input type="checkbox"/> Returned Contribution</div> <div><input type="checkbox"/> Other _____</div> <div>Purpose:</div> | | | |
| <div>Code _____</div> | | <div><input type="checkbox"/> Direct <input type="checkbox"/> In-Kind</div> <div><input type="checkbox"/> Payment of Debt</div> <div><input type="checkbox"/> Returned Contribution</div> <div><input type="checkbox"/> Other _____</div> <div>Purpose:</div> | | | |
| SUBTOTAL THIS PAGE OF SCHEDULE B | | | \$487.91 | | |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY <i>(Enter total on ITEM 17a of the Summary Sheet)</i> | | | \$487.91 | | |